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PEER-REVIEW REPORT

Name of journal: World Journal of Diabetes

Manuscript NO: 39464

Title: Effects of Antidiabetic Drugs on Epicardial Fat

Reviewer's code: 03536359

Reviewer's country: Greece

Science editor: Li-Jun Cui

Date sent for review: 2018-04-21

Date reviewed: 2018-04-23

Review time: 2 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	[ ] Accept (High priority)	Peer-Review:
[ ] Grade B: Very good	[ ] Grade B: Minor language polishing	[ ] Accept (General priority)	[Y] Anonymous
[Y] Grade C: Good	[Y] Grade C: A great deal of language polishing	[Y] Minor revision	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade D: Rejection	[ ] Major revision	Peer-reviewer's expertise on the topic of the manuscript:
[ ] Grade E: Do not publish		[ ] Rejection	[Y] Advanced
			[ ] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[Y] No

SPECIFIC COMMENTS TO AUTHORS

With this REVIEW paper the authors aimed to review the role of different antidiabetic drug regimens in epicardial fat size, or epicardial fat properties, in diabetic patients. In the CORE TIP section they mention that they discuss relations or differences? of epicardial fat in non-diabetic populations, however I think that they should focus on

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diabetic patients, as the subject of their review in non-diabetics remain unclear. The main disadvantage of the manuscript is the poor language. I would suggest rewriting it, taking the aid of some language expert. I have highlighted in the text phrases or sections that need to be improved. There are also many more phrases that have not been highlighted. I have also added 2 references that could be helpful in understanding the complex role of epicardial fat in different pathophysiologic conditions. 1. Psychari SN, Rekleiti N, Papaioannou N, et al. Epicardial fat in nonalcoholic fatty liver disease: Properties and relationships with metabolic factors, cardiac structure, and cardiac function. Angiology 2016; 67(1):41-48. 2. Wong CX, Ganesan AN, Selvanayagam JB. Epicardial fat and atrial fibrillation: current evidence, potential mechanisms, clinical implications, and future directions. Eur Heart J 2016; 38(17):1294-1302.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

[ ] The same title

[ ] Duplicate publication

[ ] Plagiarism

[Y] No

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PEER-REVIEW REPORT

Name of journal: World Journal of Diabetes

Manuscript NO: 39464

Title: Effects of Antidiabetic Drugs on Epicardial Fat

Reviewer's code: 00503221

Reviewer's country: Israel

Science editor: Li-Jun Cui

Date sent for review: 2018-05-07

Date reviewed: 2018-05-11

Review time: 4 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	[ ] Accept (High priority)	Peer-Review:
[Y] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] Accept (General priority)	[Y] Anonymous
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[Y] Minor revision	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade D: Rejection	[ ] Major revision	Peer-reviewer's expertise on the topic of the manuscript:
[ ] Grade E: Do not publish		[ ] Rejection	[Y] Advanced
			[ ] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[Y] No

SPECIFIC COMMENTS TO AUTHORS

1.What are the mechanisms involved in the pathogenesis of coronary vascular disease and epicardial adipose tissue? 2. Its known that metformin and SGLT2I can decrease cardiovasculat morbidity and mortality directly by differen intracellular pathways like autophagy and apoptosi. How the epicardiac adipose tissue is connected! 3. Its not clear

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in your review how these anti diabetic drugs improve cardiovascular disease via decrease epicardiac adipose tissue? Cytokines? others? you need to explain in details 4. can you add a schematic presentation explaining the cross talk between epicardiac adipose tissue and cardiovascular system.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Diabetes

Manuscript NO: 39464

Title: Effects of Antidiabetic Drugs on Epicardial Fat

Reviewer's code: 02565905

Reviewer's country: Brazil

Science editor: Li-Jun Cui

Date sent for review: 2018-05-07

Date reviewed: 2018-05-30

Review time: 23 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
[ ] Grade A: Excellent	[ ] Grade A: Priority publishing	[ ] Accept (High priority)	Peer-Review:
[Y] Grade B: Very good	[Y] Grade B: Minor language polishing	[ ] Accept (General priority)	[Y] Anonymous
[ ] Grade C: Good	[ ] Grade C: A great deal of language polishing	[Y] Minor revision	[ ] Onymous
[ ] Grade D: Fair	[ ] Grade D: Rejection	[ ] Major revision	Peer-reviewer's expertise on the topic of the manuscript:
[ ] Grade E: Do not publish		[ ] Rejection	[Y] Advanced
			[ ] General
			[ ] No expertise
			Conflicts-of-Interest:
			[ ] Yes
			[Y] No

SPECIFIC COMMENTS TO AUTHORS

This review relies on epicardial adipose tissue and possible drugs effects already described in type 2 diabetes mellitus treatment. The title and abstract are suitable, although the comparison of epicardial adipose tissue morphology between non-diabetic individuals and with type 2 diabetes mellitus are not described in abstract section. Still

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related to this issue (epicardial morphology), it is not described or even mentioned in main text. The authors described the presence of brown adipose tissue-specific proteins by epicardial adipose tissue. The presence of these specific proteins in withe adipose tissue denotes a presence of a novel classification of adipose tissue: the beige adipose tissue. The authors should explain the beige adipose tissue for the readers. In conclusion, the authors claim for cellular composition of epicardial adipose tissue, however it is not described in main text. I suggest a figure or even a table containing the drugs mentioned in main text together with their main effects on epicardial, visceral and subcutaneous adipose tissue.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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[ ] Duplicate publication

[ ] Plagiarism

[Y] No

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